Office of the Secretary of State Building 1 Suite 157-K 1900 Kanawha Blvd E. Charleston, WV 25305

RORY L. PERRY II Sidney L. Christie Federal Bldg. 845 Fifth Avenue, Room 101 Huntington, WV 25701



## **Mac Warner**

Secretary of State State of West Virginia Phone: 304-558-6000

886-767-8683 Visit us online: www.wvsos.com



Control Number: 258360

**Defendant: CHRISTINA MULLINS** 

COMMISSIONER OF THE WEST

VIRGINIA BUREAU FOR BEHAVIORIAL HEALTH 350 CAPITOL STREET

**SUITE 350** 

CHARLESTON, WV 25301 US

Agent: B ALLEN CAMPBELL SENIOR

ASSITANT ATTORNEY GENERAL

County: Federal

Civil Action: 3:17-01362

Certified Number: 92148901125134100002714465

Service Date: 6/5/2020

I am enclosing:

## 1 subpoena

which was served on the Secretary at the State Capitol as your statutory attorney-in-fact. According to law, I have accepted service of process in your name and on your behalf.

Please note that this office has no connection whatsoever with the enclosed documents other than to accept service of process in your name and on your behalf as your attorney-in-fact. Please address any questions about this document directly to the court or the plaintiff's attorney, shown in the enclosed paper, **not to the Secretary of State's office**.

Sincerely,

Mac Warner Secretary of State

Mac Warner

AO 88A (Rev. 02/14) Subpoena to Testify at a Deposition in a Civil Action

See Attached List of Counsel for Defendants

UNITED STATES DI	STRICT COURT & 28
for the	
Southern District of V	Vest Virginia
City of Huntington; Cabell County Commission  Plaintiff  Y.  AmerisourceBergen Drug Corporation, et al.  Defendant  SUBPOENA TO TESTIFY AT A DEPO	Civil Action No. 3:17-01362; 3:17-01665
To: Christina Mullins, Commissioner of the We c/o B. Allen Campbell, Senior Assistant Attorney Ge	st Virginia Bureau for Behavioral Health,
Testimony: YOU ARE COMMANDED to appear at the deposition to be taken in this civil action. If you are an organizar or managing agents, or designate other persons who consent to test those set forth in an attachment:  Place: Jackson Kelly PLLC	tion, you must designate one or more officers directors
500 Lee Street East, Suite 1600 Charleston, WV 25301	07/08/2020 9:00 am
The deposition will be recorded by this method: Telec	onference before a Court Reporter.
Production: You, or your representatives, must also bring electronically stored information, or objects, and must permaterial:  Documents requested in the Request for Production.	ermit inspection, copying, testing, or sampling of the
The following provisions of Fed. R. Civ. P. 45 are attached Rule 45(d), relating to your protection as a person subject to a subject to a subject to this subpoena and the potential consequences of not do Date:  Object 1.	opoena; and Rule 45(e) and (g), relating to your duty to
Signature of Clerk or Deputy Clerk	Attorney's signature
The name, address, e-mail address, and telephone number of the a AmerisourceBergen Drug Corporation, Cardinal Health, Inc., and McKesson Co	attorney representing (name of party) All Defendants  rporation, who issues or requests this subpoena, are:

Notice to the person who issues or requests this subpoena

If this subpoena commands the production of documents, electronically stored information, or tangible things before trial, a notice and a copy of the subpoena must be served on each party in this case before it is served on the person to whom it is directed. Fed. R. Civ. P. 45(a)(4).

AO 88A (Rev. 02/14) Subpoena to Testify at a Deposition in a Civil Action (Page 2)

Civil Action No. 3:17-01362; 3:17-01665

## PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 45.)

I received this sul on (date)	ppoena for (name of individual and title, if	any)	
On (acte)			
☐ I served the su	bpoena by delivering a copy to the na	amed individual as follows:	
*.		on (date) ; or	
☐ I returned the s	subpoena unexecuted because:		
My fees are \$	for travel and \$	for services, for a total of \$	0.00
My fees are \$	for travel and \$	for services, for a total of \$	0.00
I declare under pe	nalty of perjury that this information	is true.	
Date:			
		Server's signature	
		Printed name and title	
		Server's address	

Additional information regarding attempted service, etc.: